

Mr. Speaker, as the Representative of the 7th Congressional District of New York, which includes a substantial portion of the Long Island Sound coastline, and a Member of the House Committee on Resources, I can think of few efforts more important to our environment. I intend to work closely with Congresswoman LOWEY and Congresswoman DELAURO to ensure we enact this vital measure into law early on in the 106th Congress.

TRIBUTE TO QUENTIN AND ELLEN BURKE

HON. DUNCAN HUNTER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. HUNTER. Mr. Speaker, I rise today to recognize the outstanding service and dedication of two of my constituents, Quentin and Ellen Burke of Imperial County. It is my understanding that Mr. and Mrs. Burke will be retiring after working for 34 years with the American Field Service (AFS), the international student exchange program.

Mr. and Mrs. Burke, who were publishers of the Holtville Tribune for 25 years, began their dedicated service to AFS in 1964 when they interviewed a visiting student, Helen Keel, from Switzerland and became excited about the program. Soon thereafter, they began to regularly print articles and photographs in their weekly newspaper regarding AFS activities and events. For 15 years, Ellen acted as liaison between the Imperial Valley chapter and AFS international.

During the past three decades, Quentin and Ellen Burke have served as hosts for foreign students, worked with local families to open their homes and encouraged American students to travel abroad for the opportunity and experience to learn about other lands and cultures. I firmly believe that through their efforts with AFS, Mr. and Mrs. Burke have made a contribution to promoting peace through the global exchange of ideas, the sharing of customs and the collaboration of knowledge. On March 21, friends and family will gather in El Centro to honor this generous and caring couple. I would like to join with these individuals in honoring Mr. and Mrs. Burke for all their remarkable achievements and wishing them great happiness and success in all their future endeavors.

TRIBUTE TO BEN ALEXANDER

HON. SCOTT McINNIS

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. McINNIS. Mr. Speaker, I wanted to take this opportunity to recognize former state Senator Ben Alexander who, for the last four years, has provided strong leadership and a dynamic voice for Western Colorado in the Colorado General Assembly. In doing so, I would like to pay tribute to my friend for his distinguished service and wish him well in all of his future endeavors.

Following his election to the state Senate in 1994, Senator Alexander rose through the rank and file with unprecedented speed serving as Vice-chairman of the Senate Finance Committee in his first year in the legislature. In just his third year, Senator Alexander was named Chairman of the powerful Senate Education Committee where he would play a leading role in shaping Colorado's education policy for the next two years. In addition to his duties as chairman, Senator Alexander also provided powerful leadership on the Senate's Finance and Business Affairs and Labor committees.

In addition to his service in the Colorado legislature, Senator Alexander also served his country distinguishedly and with great valor as an F-111 pilot for the Air Force during the Vietnam War. Senator Alexander's remarkable bravery during his 69 air combat missions earned him the Distinguished Flying Cross and Air Medal with three Oak Leaf Clusters as well as the respect and gratitude of those familiar with his extraordinary sacrifices.

Senator Alexander's eagerness to serve the American people, both as a pilot and legislator, has won him the unwavering esteem and admiration of friends and colleagues alike. It is clear that Colorado is a better place because of his remarkable service.

It is with this, Mr. Speaker, that I pay tribute to this true public servant and friend for his extraordinary efforts and wish him all the best in each of his future endeavors.

INTRODUCTION OF THE MEDICARE FULL ACCESS TO CANCER TREATMENT ACT

HON. GENE GREEN

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. GREEN of Texas. Mr. Speaker, today I am introducing the Medicare Full Access to Cancer Treatment Act. This bill is critical to protect the Medicare beneficiary's access to the newest and best treatments for cancer.

The BBA of 1997 directed HCFA to implement a prospective payment system (PPS) for hospital outpatient services provided through the Medicare program. When Congress passed this requirement, we recognized that some services would be difficult or impossible to include in a PPS and therefore authorized HCFA to use its discretion to exclude certain services from the payment system. Unfortunately, under their proposed rule, HCFA would bundle the costs of all cancer drugs into a small number of Ambulatory Payment Categories (APCs) and pay hospitals only for the average cost of these services.

The main problem with this proposal is that it fails to recognize the complexities of cancer treatments and the wide range and individual needs of each patient with cancer. As a result, the new payment system could threaten the quality and availability of cancer treatment for Medicare beneficiaries. In fact, under HCFA's plan, the lowest reimbursement rate for some cancer treatments would be only \$52.70 (which is expected to include supportive care such as anti-nausea drugs)! Moreover, under the proposal, new drugs, which are defined as

anything after 1996, would be reimbursed at this lowest rate. Such a policy would have a crippling effect on research and development for new drug therapies.

This policy will create an overall reduction in the quality of patient care since hospitals will be pressured to provide the least expensive, rather than the most effective treatment. Moreover, research and development for new drug therapies may be diminished or delayed, ultimately denying the patients of today and those of future generations access to more effective treatments.

To correct this problem, the Medicare Full Access to Cancer Treatment Act would carve-out cancer treatment from the outpatient PPS. This simple yet sensible action would fully protect Medicare beneficiaries' continued access to the best and most effective cancer care.

I am pleased to introduce this legislation with over twenty bipartisan original cosponsors as well as the support of several patient and provider organizations, including Center for Patient Advocacy, National Alliance of Breast Cancer Organizations, Cancer Care, Inc., Cancer Research Foundation of America, Oncology Nursing Society, Association of Community Cancer Centers, Lymphoma Research Foundation of America, Alliance for Lung Cancer Advocacy, Support and Education, Lupus Foundation of America, US-TOO International and the Multiple Myeloma Research Foundation.

CONSUMER PROTECTION LEGISLATION

HON. RON PAUL

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. PAUL. Mr. Speaker, I rise to introduce my Consumer Protection Package—consisting of two pieces of legislation which will benefit consumers by repealing federal regulations. The first piece of legislation, the Consumer Health Free Speech Act, stops the Food and Drug Administration (FDA) from interfering with consumers' access to truthful information about foods and dietary supplements in order to make informed choices about their health. The second bill, the Television Consumer Freedom Act, repeals federal regulations which interfere with a consumers ability to avail themselves of desired television programming.

The Consumer Health Free Speech Act accomplishes its goal by making two simple changes in the Food and Drug Act. First, it adds the six words "other than foods, including dietary supplements" to the statutory definition of "drug," thus allowing food and dietary supplement producers to provide consumers with more information regarding the health benefits of their products, without having to go through the time-consuming and costly process of getting FDA approval. This bill does not affect the FDA's jurisdiction over those who make false claims about their products.

Scientific research in nutrition over the past few years has demonstrated how various foods and other dietary supplements are safe and effective in preventing or mitigating many

diseases. Currently, however, disclosure of these well-documented statements triggers more extensive drug-like FDA regulation. The result is consumers cannot learn about simple and inexpensive ways to improve their health. Just last year, the FDA dragged manufacturers of Cholestin, a dietary supplement containing lovastatin, which is helpful in lowering cholesterol, into court. The FDA did not dispute the benefits of Cholestin, rather the FDA attempted to deny consumers access to this helpful product simply because the manufacturers did not submit Cholestin to the FDA's drug approval process!

The FDA's treatment of the manufacturers of Cholestin is not an isolated example of how current FDA policy harms consumers. Even though coronary heart disease is the nation's number-one killer, the FDA waited nine years until it allowed consumers to learn about how consumption of foods and dietary supplements containing soluble fiber from the husk of psyllium seeds can reduce the risk of coronary heart disease! The Consumer Health Free Speech Act ends this breakfast table censorship.

The bill's second provision prevents the FDA's arbitrary removal of a product from the marketplace, absent finding a dietary supplement "presents a significant and unreasonable risk of illness or injury." Current law allows the FDA to remove a supplement if it prevents a "significant or unreasonable" risk of disease. This standard has allowed the FDA to easily remove a targeted herb or dietary supplement since every food, herb, or dietary supplement contains some risk to at least a few sensitive or allergic persons. Under this bill, the FDA will maintain its ability to remove products from the marketplace under an expedited process if they determine the product causes an "imminent danger."

Allowing American consumers access to information about the benefits of foods and dietary supplements will help America's consumers improve their health. However, this bill is about more than physical health, it is about freedom. The first amendment forbids Congress from abridging freedom of all speech, including commercial speech.

My second bill, the Television Consumer Freedom Act, repeals federal regulations which interfere with a consumers ability to avail themselves of desired television programming. For the last several weeks, congressional offices have been flooded with calls from rural satellite TV customers who are upset because their satellite service providers have informed them that they will lose access to certain network television programs.

In an attempt to protect the rights of network program creators and affiliate local stations, a federal court in Florida properly granted an injunction to prevent the satellite service industry from making certain programming available to its customers. This is programming for which the satellite service providers had not secured from the program creator-owners the right to rebroadcast. At the root of this problem, of course, is that we have a so-called marketplace fraught with interventionism at every level. Cable companies have historically been granted franchises of monopoly privilege at the local level. Government has previously intervened to invalidate "exclusive dealings"

contracts between private parties, namely cable service providers and program creators, and have most recently assumed the role of price setter. The Library of Congress, if you can imagine, has been delegated the power to determine prices at which program suppliers must make their programs available to cable and satellite programming service providers.

It is, of course, within the constitutionally enumerated powers of Congress to "promote the Progress of Science and useful Arts by securing for limited Times to Authors and Inventors the exclusive Right to their respective Writings and Discoveries." However, operating a clearing-house for the subsequent transfer of such property rights in the name of setting a just price or "instilling competition" via "central planning" seems not to be an economically prudent nor justifiable action under this enumerated power. This process is one best reserved to the competitive marketplace.

Government's attempt to set the just price for satellite programming outside the market mechanism is inherently impossible. This has resulted in competition among service providers for government privilege rather than consumer-benefits inherent to the genuine free market. Currently, while federal regulation does leave satellite programming service providers free to bypass the governmental royalty distribution scheme and negotiate directly with owners of programming for program rights, there is a federal prohibition on satellite service providers making local network affiliate's programs available to nearby satellite subscribers. This bill repeals that federal prohibition and allows satellite service providers to more freely negotiate with program owners for programming desired by satellite service subscribers. Technology is now available by which viewers will be able to view network programs via satellite as presented by their nearest network affiliate. This market-generated technology will remove a major stumbling block to negotiations that should currently be taking place between network program owners and satellite service providers.

Mr. Speaker, these two bills take a step toward restoring the right of free speech in the marketplace and restoring the American consumer's control over the means by which they cast their "dollar votes." In a free society, the federal government must not be allowed to prevent people from receiving information enabling them to make informed decisions about whether or not to use dietary supplements or eat certain foods. The federal government should also not interfere with a consumer's ability to purchase services such as satellite or cable television on the free market. I, therefore, urge my colleagues to take a step toward restoring freedom by cosponsoring my Consumer Protection Package: the Consumer Health Free Speech Act and the Television Consumer Freedom Act.

"AUDIOLOGIST" FOR MEDICAID

HON. ED WHITFIELD

OF KENTUCKY

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. WHITFIELD. Mr. Speaker, today I am introducing a bill with my good friend from

Ohio, Mr. SHERROD BROWN, that would establish a Medicaid definition of "audiologist" used for Medicare reimbursement. Congress updated the definition of "audiologist" for Medicare reimbursement in 1994, but the same update has not yet occurred for Medicaid. The definition used by Medicare, and which I am proposing to be used for Medicaid purposes, relies primarily on state licensure or registration as the mechanism for identifying audiologists who are qualified to participate in the program.

Currently, under Health Care Financing Administration (HCFA) regulations, the Medicaid program uses a definition of "audiologist" that is nearly thirty years old and relies upon certification from third party organizations. HCFA's Medicaid definition has not kept pace with the significant changes that have occurred in audiology credentialing over the last three decades. The current definition also does not reflect the critical role that state licensure/registration now plays in assuring the quality of audiology services. State licensure/registration statutes currently exist in 49 of the 50 states.

Today, there are approximately 28 million Americans with some degree of hearing loss. While this number will grow along with the aging of the Baby Boomers, hearing loss is not exclusively an "older" person's problem. A recent article in the Washington Post entitled "Hearing Loss Touches A Younger Generation" points out that more and more Americans are suffering from various degrees of hearing loss at a younger age. The article refers to a Journal of the American Medical Association study which found that nearly 15% of children ages 6 to 19 who were tested showed some hearing deficit in either low or high frequencies. Audiologists are specifically trained and licensed to provide a broad range of diagnostic and rehabilitative services to persons with hearing loss and related disorders (e.g. vestibular/balance disorders).

The legislation would not expand or change the scope of practice for an audiologist, or alter the important relationship that exists between audiologists and Ear, Nose and Throat physicians. There would be no new benefits or services under this legislation. The bill I am introducing today, while technical in nature, would help establish uniform professional qualifications for audiologists, and a more reliable standard for the more than 28 million people with a hearing loss who may use audiological services.

EDUCATION FLEXIBILITY PARTNERSHIP ACT OF 1999

SPEECH OF

HON. DAVID D. PHELPS

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 10, 1999

The House in Committee of the Whole House on the State of the Union had under consideration the bill (H.R. 800) to provide for education flexibility partnerships:

Mr. PHELPS. Mr. Chairman, I rise today to express my strong support for H.R. 800, the Education Flexibility Partnership Act, of which